PTOISE 06 (08-03)
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Uni		Reduction Act of	ATION		RMINATIO			ormation unite		ys a valid CIMB o onfo! Docket Nu 6646	
CLAIMS AS FILED - PART I (Cotumn 1) (Cotumn 2) SMALL ENTITY									OR	OTHER THAN OR SMALL ENTITY	
FOR . NUMBER FILED NUMBER EXTRA				R EXTRA		RATE	ÆE		RATE	FEE	
	C FEE FR 1,18(a))							ļ	QR		<u>.</u>
	AL CLAIMS FR 1.16(cj)		minus 20				X 5		· OR	× 4	
	PENDENT CLAIN FR 1.16(b))	is	minus 3 ·				x s		OR	x 1	
MULTIPLE DEPENDENT CLAIM PRESENT (27 CFR 1.16(4))							+5 0		OR	+: •	
of the difference in column 1 is less than zero, enter "O' in column 2.							TOTAL		OR	TOTAL	
						1012			TOTAL (		
CLAIMS AS AMENDED — PART II										OTHER	THAN
	(Column 1) (Column 2) (Column 3)					SMALL ENTITY		OR	SMALL		
NT A	4/5/06	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
X	Total (27 CFR 1.18(12)	16	Minus	20	. 0		x 5		OR	x s •	
AMENDMENT	Endependent (SF CFR 1,140/g	2	Minus	<sup></sup> 3	.0		x 5		OR	X 8 =	
¥	FIRST PRESENT	ATION OF MULTIPLE	E DEPENDE	ONT CLAIM (37 CF	R 1.15(6))				OR	+5 •	•
							TOTAL ADDL FEE		OR	TOTAL ADD'L FEE	
9	-9-06			**************************************		ADDLIFEE			ADDITEC		
Ť		(Cotumn 1) CLAIMS		(Column 2) HIGHEST	(Cotumn 3)	ŀ			i		
ENT B		REMAINING AFTER AMENOMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADOI- TIONAL FEE		RATE .	ADDI- TIONAL FEE
ENDMENT	Total G7 CFR 1.18(r)	18.	Minus	. Zo	•		x s =		OR	X 5=	
EN	Endependent (37 CFR 1,14(h))	2	Minus	··· 3	. /		x 3a		OR.	X 5	
FRIST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (17 CFR 1.15(d))							+5 •		OR	+3 .	
						•	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
_		(Column 1)		(Column 2)	(Cotumn 3)						
STA	2/16/07	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADOI- TIONAL FEE
ME	Total pr cfa i.iapa	18	Minus	10	• /		X 5 =	1:/	OR	× 8	/
AMENDMENT	tridependent (s) CFA 1.1apg	2/	Minus	3	• /	]	x s=		OR	x 3	
¥	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.19(d))					].	+5 /		OR	٠٠/ .	
			9,				ADD'L FEE		OR	ADD'L FEE	
	" If the "Highest	otumn 1 is less the Number Previous! Number Previoush	y Paid For	IN THIS SPACE	is less than 20,	er.			_		

"If the "Highest Number Previously Paid For" (I TMIS SPACE is less litan 3, enter "3".

The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.18. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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